

N1700000 6944

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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R. WHITE

JUL 09 2019

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: National Black Business Support Corporation
Name of Corporation

DOCUMENT NUMBER: N17000006944

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Pamela A. Tedesco
Name of Contact Person

National Black Business Support Corporation
Firm/Company

495 Grand Blvd., Ste 206
Address

Miramar Beach FL 32550
City/State and Zip Code

Pam@NBBSCL.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Pam Tedesco at (850) 244-6896
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: National Black Business Support Corporation
2. The principal office address: 495 Grand Blvd., Ste 206
Miramar Beach, FL 32550
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 06/30/17 Document number: N17000006944
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Pamela A. Tedesco
113 N. Monroe St.
Tallahassee FL 32301

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Pam Tedesco
495 Grand Blvd. Ste 206
P.O. Box NOT acceptable
Miramar Beach FL 32550

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
Signature of an officer or director

Pamela A. Tedesco, President
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]
Signature of Registered Agent

6/24/19
Date

If signing on behalf of an entity:

Typed or Printed Name

*** FILING FEE: \$35.00 ***